

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:

Date of SBE Approval of Grant Criteria 10/11/05

2006--2007
(years) (years)

Mandated Activities Project, Preschool Outcomes Measurement Grant
(title)

Type: ☐ Initial ☐ Amendment ☒ Continuation

Legislation Authorizing This Grant Program: P.L. 105-17 Individuals with Disabilities Education Act (IDEA)

☒ Federal Grant: CFDA Number 84.173A

☐ State Grant

☐ Other (Private, Foundation)

2. Purpose of Grant Program: The grant will assist the Michigan Department of Education to collect newly required outcome indicator data for children eligible for Part B of the Individuals with Disabilities Education Improvement Act, Section 619. This grant will help to align assessment tools to MI summary form, develop a data collection method, pilot the data collection, and train the early childhood special education field to measure and report outcome data.

Type of Grant Program: (check one)

☒ Competitive
☐ Formula
☐ Other: (specify below)

3. SBE Priorities and Policies That This Grant Program Supports: (check all that apply)

Priorities

- ☐ Integrating Communities and Schools
☐ Elevating Educational Leadership
☐ Embracing the Information Age
☐ Ensuring Early Childhood Literacy
☐ Ensuring Excellent Educators

Policies

- ☐ Bullying
☐ Character Education
☐ Creating Effective Learning Environments
☐ Family Involvement
☐ Safe Schools

☒ Other: (specify below)

To assist the Michigan Department of Education in meeting the federal requirements of the State Performance Plan, Indicator 7.

4. Grant Categories (if not described in Item 2): ☒ NOT APPLICABLE

5. Target Population to be Served by Grant:

Preschool Special Education Children aged 3-5.

6. Total Funds Awarded:

\$500,000

7. Eligible Applicants:

High/Scope Educational Research Foundation

8. Description of Priorities Given to Any Specific Population or Location: ☒ NOT APPLICABLE

9. Grant Administration:

Office	Unit	Contact	Phone
ECE&FS	Preschool and Early Elementary Programs	Stefanie Kujaczynski Ed.D.	517/241-6354

Prepared by: Stefanie Kujaczynski Ed.D.

Phone Number: 517/241-6354

13291 1854

10. OFFICE

Office Director Approval Signature: Lindy Bueh Date: 10.13.06
Phone: 13592 Comments:

11. GRANTS OFFICE

Grants Office Approval Signature: Mary Ann Chartrand Date: 10/17/06
Comments:

☐ Exhibit A Not Required

☒ Exhibit B Not Required

☒ Exhibit C Not Required

12. DEPUTY SUPERINTENDENT

Deputy Superintendent Approval Signature: Margaret Holloway for JH Date: 10/17/06
Comments:

13. SUPERINTENDENT

Superintendent Approval Signature: [Signature] Date: 10-19-06
Comments:

INSTRUCTIONS

A. Complete items 1-10 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 11-14.

B. Attach three (3) sets of Exhibits A, B, and C.

Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.

Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.

Exhibit C---Map of Michigan indicating the location of recommended applicants. Link to:
<http://mdeintranet/inside/off/grants/grants.htm> for sample maps.

C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.

D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grants Administration and Coordination Unit.

Exhibit A

2006-2007 Mandated Activities Project
Preschool Outcomes Measurement Grant

<u>Agency</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
High/Scope Educational Research Foundation	\$500,000	\$500,000
	<hr/> \$500,000	<hr/> \$500,000